

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	E-H	32	5/2
O.I.P.E. CLASSIFIER	ED	57	5/7/01
FORMALITY REVIEW	ZM	927	07/30/01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      0 ..... Objected

Claim	Date
Final	1
Original	2
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Claim	Date
Final	51
Original	52
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Claim	Date
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Original	102
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If more than 150 claims or 10 actions  
staple additional sheet here

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5/5/01  
07/18/01